

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>4/11/00</i>
O.I.P.E. CLASSIFIER		<i>5</i>	<i>4-19-00</i>
FORMALITY REVIEW		<i>65372</i>	<i>6-7-00</i>
RESPONSE FORMALITY REVIEW			<i>8-8-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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